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CONFIRMATION NO. 4744

Bib Data Sheet

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| SERIAL NUMBER 09/681,448 | FILING OR 371(c) DATE 04/07/2001 RULE | CLASS 705 | GROUP ART UNIT 3639 | ATTORNEY DOCKET NO. |
| APPLICANTS Eric Schneider, University Heights, OH; | | | | |
| ** CONTINUING DATA ***** This application is a CIP of 09/650,827 08/30/2000 PAT 6,901,436 and is a CIP of 09/440,606 11/15/1999 PAT 6,442,549 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 04/27/2001 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY OH | SHEETS DRAWING 12 | TOTAL CLAIMS 25 |
| INDEPENDENT CLAIMS 5 | | | | |
| ADDRESS 24226 | | | | |
| TITLE MNEMONIC DISCOVERY AND NOTIFICATION METHOD, PRODUCT, AND APPARATUS | | | | |
| FILING FEE RECEIVED 530 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |